Fill in this information to identify your case:						
Debtor 1	ebtor 1 Tobey Ryon Waggoner					
Debtor 2 (Spouse, if filing)						
United States Bankruptcy Court for the: District of Utah						
Case number(if known)						

Check one box only	as directed	in this	form	and	ir
Form 22A-1Supp:					

- 1. There is no presumption of abuse
- 2. The calculation to determine if a presumption of abuse applies will be made under *Chapter 7 Means Test Calculation* (Official Form 22A-2).
- □ 3. The Means Test does not apply now because of qualified military service but it could apply later.
- ☐ Check if this is an amended filing

Official Form 22A - 1

Chapter 7 Statement of Your Current Monthly Income

12/14

7/10/15 6:43PM

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file *Statement of Exemption from Presumption of Abuse Under § 707(b)(2)* (Official Form 22A-1Supp) with this form.

Part 1: Calculate Your Current Monthly Income

- 1. What is your marital and filing status? Check one only.
 - □ Not married. Fill out Column A, lines 2-11.
 - ☐ Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11.
 - Married and your spouse is NOT filing with you. You and your spouse are:
 - Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11.
 - □ Living separately or are legally separated. fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C § 707(b)(7)(B).

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

			Column A Debtor 1		Column B Debtor 2 or non-filing spouse		
Your gross wages, salary, tip all payroll deductions).	os, bonuses, overtime,	and co	ommissions (before	\$	0.00	\$	0.00
3. Alimony and maintenance pa Column B is filled in.	nyments. Do not include	e payme	ents from a spouse if	\$	0.00	\$	0.00
 All amounts from any source of you or your dependents, i from an unmarried partner, me and roommates. Include regula filled in. Do not include payment 	ncluding child support mbers of your househol ar contributions from a s	t. Includ ld, your	le regular contributions dependents, parents,	\$	0.00	\$	0.00
5. Net income from operating a Gross receipts (before all deductions) Ordinary and necessary operating expenses Net monthly income from a business, profession, or farm	\$ 4,466.67 -\$ 2,004.50 \$ 2,462.17	\$ -\$	3,611.62 2,726.79 884.83 Copy here ->	\$	2,462.17	\$	884.83
6. Net income from rental and	other real property			–			
Gross receipts (before all dedu Ordinary and necessary opera	ting expenses	\$ -\$	0.00 0.00 0.00 Copy here ->	. \$	0.00	\$	0.00
Net monthly income from renta 7. Interest, dividends, and roya		» _	COPY NETC ->	\$	0.00	\$	0.00

7/10/15 6:43PM

Debto	Tobey Ryon Waggoner			Case number	er (<i>if known</i>)			
				Column A Debtor 1		Column B Debtor 2 o non-filing		
8.	Unemployment compensation			\$	0.00	\$	0.00	
	Do not enter the amount if you contend that the amou under the Social Security Act. Instead, list it here:	nt received was a benef	it					
	For you S		00					
	For your spouse	\$0.0	00					
9.	Pension or retirement income. Do not include any a benefit under the Social Security Act.	mount received that wa	s a	\$	0.00	\$	0.00	
10.	Income from all other sources not listed above. Sp Do not include any benefits received under the Social received as a victim of a war crime, a crime against hid domestic terrorism. If necessary, list other sources on total on line 10c.	Security Act or payment umanity, or international	ts or					
	10a			\$	0.00	\$	0.00	
	10b			\$	0.00	\$	0.00	
	10c. Total amounts from separate pages, if any.		+	\$	0.00	\$	0.00	
11.	Calculate your total current monthly income. Add I each column. Then add the total for Column A to the t		\$	2,462.17	+ \$ _	884.83	\$ 3,347.0	
Part	2: Determine Whether the Means Test Applies	to You					Total current moni	thly
· are	Determine Whether the means rest Applies	10 100						
12.	Calculate your current monthly income for the yea							
	12a. Copy your total current monthly income from line	11		Сор	y line 11 l	nere=> 12a	. \$ 3,347.0	0_
	Multiply by 12 (the number of months in a year)						x 12	
	12b. The result is your annual income for this part of t	he form				12b	\$40,164.0	0_
13.	Calculate the median family income that applies to	you. Follow these step	s:					
	Fill in the state in which you live.	UT						
	Fill in the number of people in your household.	6						
	Fill in the median family income for your state and size	e of household.				13.	\$89,646.0	0_
14.	How do the lines compare?							
	14a. Line 12b is less than or equal to line 13. Go to Part 3.	On the top of page 1, ch	eck bo	x 1, There is	no presur	mption of abu	se.	
	14b. Line 12b is more than line 13. On the top Go to Part 3 and fill out Form 22A-2.	of page 1, check box 2	The p	resumption o	of abuse is	determined b	by Form 22A-2.	
Part	3: Sign Below							
	By signing here, I declare under penalty of perjur	y that the information or	n this s	tatement and	d in any att	achments is	true and correct.	
	X /s/ Tobey Ryon Waggoner Tobey Ryon Waggoner							
	Signature of Debtor 1							
	Date July 10, 2015 MM / DD / YYYY							
	If you checked line 14a, do NOT fill out or file Fo	rm 22A-2.						
	If you checked line 14b, fill out Form 22A-2 and f	ile it with this form.						